

STATE OF NEW JERSEY
OFFICE OF THE ATTORNEY GENERAL
DEPARTMENT OF LAW AND PUBLIC SAFETY
DIVISION OF ALCOHOLIC BEVERAGE CONTROL
P.O. BOX 087, 140 EAST FRONT STREET
TRENTON, NJ 08625-0087

**PETITION FOR TEMPORARY PERMIT TO OPERATE PENDING ACTION
BY MUNICIPAL ISSUING AUTHORITY UPON PETITIONER-S
APPLICATION FOR LICENSE RENEWAL [AI]**

This application must be filed with the State Division of Alcoholic Beverage Control. It is necessary to be filed with appropriate fee when application for renewal of license and renewal fees have been filed with the municipality, but the municipal governing body has not renewed the license by July 1st, and the licensee wishes to conduct business. The fee is **\$75.00** plus the daily fee of \$5.00 per day, payable by cash, check or money order payable to the Division of Alcoholic Beverage Control. The application must be completed in full, signed by the applicant, and endorsed by the municipality. The application can be mailed or hand-delivered to the Division of A.B.C. at the above-captioned address.

1. Name of licensee as it appears on the license certificate:

2. Address of licensed business as it appears on the license certificate:_____

3. New Jersey 12-digit license number_____-_____-_____-_____

4. Requested effective dates for Ad Interim Permit:

From_____ to _____ inclusive.
Day/Month/Year Day/Month/Year

Name/Title of Authorized Signator_____
[Please Print]

[Signator-s name must appear on 12-page license application: as President, Vice President, Sole Proprietor or Partner.]

Signature_____ Date_____/_____/_____

**[OTHER SIDE TO BE COMPLETED BY MUNICIPAL CLERK OR
A.B.C. BOARD SECRETARY]**

OVER 

TO BE COMPLETED BY MUNICIPAL AUTHORITIES

1. Date renewal application was filed and renewal fees paid:
____/____/____.
2. Date Municipal Council or A.B.C. Board will meet to act on renewal of this license: ____/____/____.
3. Please state reason why the license was not renewed by resolution prior to July 1st.: _____

4. Does the municipality object to the issuance of an *Ad Interim Permit* by the State Division of Alcoholic Beverage Control?
____Yes ____No

Municipal Clerk or A.B.C. Board Secretary:

[Please Print]

Signature:_____

THE FOLLOWING FORMULA PERTAINS TO ALL RETAIL LICENSEES:

\$5.00 PER DAY X [No. of Days] _____ = _____[AI Fee]

[AI Fee]_____ + \$75.00 = \$_____
[Total Fee]

If an additional permit is needed, the following formula applies:

\$5.00 [Per Day] X _____ [No. of Days] = \$_____
[Total Fee]

DO NOT SEND CASH THROUGH THE MAIL